

1630

STANDARD CERTIFICATE OF DEATH

1. Place of Death

County Yavapai State ARIZONA
City or Town McCabe

2. Full NameJAMES W. CANTWELL

Address _____

Personal and Statistical Particulars

Sex M	Color	Single, Married, Wid- owed or Divorced
Age _____		
Birthplace _____		
Burial, Cremation or Removal:		
Place _____		
Undertaker _____		

Medical CertificateDate of Death Feb. 10, 1900

Cause _____

Duration _____

R. W. Looney
Doctor or AttendantFiled 1-5-01J. P. Farley
Recorder Registrar